

**STATE OF UTAH
DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSING**

APPLICATION FOR LICENSURE

ARCHITECT

DOPL-AP-058 REV 09/04/2003

APPLICATION INSTRUCTIONS AND INFORMATION

General Statement: The Division desires to provide courteous and timely service to all applicants for licensure. To maximize its efficiency and level of service, the Division will process complete applications only. **A complete application includes all applicable supporting documents and fees.** The fees are for processing your application and will not be refunded. Failure to complete the application and supply necessary information will delay processing and may result in denial of licensure. Please read all instructions carefully.

Address of Record: The address listed on the application will be your address of record. All correspondence from the Division will be sent to that address. It is your responsibility to directly notify the Division of any change in address.

Social Security Number: Your social security number is classified as a private record pursuant to Title 63, Chapter 2, Utah Government Records Access and Management Act (GRAMA). It is used as an individual identifier for our licensing database and for purposes of the child support enforcement pursuant to Subsection 78-32-17(3) and is mandatory pursuant to Subsection 58-1-301(1), Utah Code Ann., which implements the requirements of 42 U.S.C. 666(a)(13). An application that does not include a social security number is incomplete and cannot be processed.

SUPPORTING DOCUMENTS AND FEES:

In addition to submitting a completed application, complete one of the following (A, B, or C):

A. If you have a current NCARB Council Record:

1. Request NCARB to submit your current Council Record.
2. Submit a **\$110.00** non-refundable application-processing fee.

B. If you do not have a NCARB Council Record, but are currently licensed in another state:

1. Submit transcript(s) documenting graduation from a NAAB accredited architectural program

OR

Submit a “Verification of Experience for Licensure as an Architect” form (attached to this application) documenting practice as a licensed principal in responsible charge for 5 of the last 7 years in a recognized jurisdiction.

2. Submit a “Request for Verification of License” form (attached to this application) documenting your passing scores on the ARE and current licensure as an architect from a recognized jurisdiction.
3. Submit a **\$110.00** non-refundable application-processing fee.

C. If you are applying for initial licensure in Utah and not licensed in any other state:

1. Submit transcript(s) documenting graduation from a NAAB accredited architectural program.
2. Request NCARB to submit documentation of completing IDP and the ARE.
3. Submit a **\$110.00** non-refundable application-processing fee.

ADDITIONAL IMPORTANT INFORMATION:

1. **Utah Law and Rules Examination:** Enclosed, as part of this application, is the take-home Utah Architect Law and Rules Examination. Return the completed examination with your application for licensure. Do not submit it separately.

The following applicable laws and rules are available on the Internet at www.dopl.utah.gov:

- ☐ Division of Occupational and Professional Licensing Act
- ☐ General Rules of the Division of Occupational and Professional Licensing
- ☐ Architect Licensing Act
- ☐ Architect Licensing Act Rules

You may also purchase the laws and rules for a fee from Experior, 5486 South 1900 West, Suite C, Taylorsville, Utah 84118, (801) 355-5009.

2. **Current Documents:** Applications, statutes and rules may change from time to time. If you have not recently obtained any of these documents, you may want to contact the Division or visit our Internet site to verify that you have current versions.
3. **NCARB Council Record - IDP Record:** To obtain a NCARB Council Record or IDP Record contact the NCARB Intern and Professional Service Department at (202) 879-0520 or visit the web site: www.ncarb.org
4. **Foreign Educated Applicants – EESA Report:** Foreign educated applicants who do not have a NAAB accredited degree or do not have a NCARB Council Record may have their foreign education evaluated by EESA to determine your educational equivalency. Application forms for the “Comprehensive Evaluation” may be obtained from EESA by calling (202) 783-2007 or visit the web site: www.naab.org
5. **Direct Registration – Initial Licensure:** If you are a Utah resident, register directly with NCARB to complete IDP and to take the ARE. When you complete IDP and the ARE, submit a license application to the Division and request NCARB to submit documentation of completing IDP and passing the ARE.

Contact the NCARB Intern and Professional Service Department at (202) 879-0502 or visit the web site: www.ncarb.org

6. **License Renewal:** All architect licenses expire May 31 of every even-numbered year.

Unlike many other states, Utah’s license renewal schedule **is not** based on the licensee’s date of initial licensure. Under Utah’s renewal system, all licenses in each profession expire as a group on the same day every two years. Therefore, the length of a licensee’s first renewal cycle depends on how far into the current renewal cycle initial licensure was obtained. Each renewal cycle thereafter is for a full two years.

Additionally, the fee paid with this application for licensure is an application-processing fee only. It does not include a renewal fee. Each licensee is responsible to renew licensure **PRIOR** to the expiration date shown on the current license. Renewal information is disseminated to each licensee at the licensee’s last known address, as provided to the Division, approximately two months prior to the expiration date shown on the license.

7. **License Number:** For official records, correspondence and use of the seal, you may use the first 6 or 7 digits of the license number located on your “license”.
8. **Seal Design:** The specifications for the seal are found in Rule, R156-3a-601.
9. **Continuing Education:** Not required.

10. **Name Change:** If you have been licensed by the Division under any other name, please submit documentation of your name change such as a copy of your marriage license or divorce decree.
11. **Updating Address Information:** It is a licensee's responsibility to maintain a current address with the Division. If your address is incorrect, you will not receive renewal notices or other correspondence.
12. **Payments:** Make licensure fees payable to "DOPL."
13. **Mail Complete Application to:**
 - By U.S. Mail
 - Division of Occupational & Professional Licensing
 - P.O. Box 146741
 - Salt Lake City, Utah 84114-6741
 - By Delivery or Express Mail
 - Division of Occupational & Professional Licensing
 - 160 East 300 South, 1st Floor Lobby
 - Salt Lake City, Utah 84111
14. **Telephone Numbers:** (801) 530-6628
(866) ASK-DOPL – Toll-free in Utah
(866) 275-3675
15. **Fax Number:** (801) 530-6511

APPLICATION FOR LICENSURE

GENERAL INFORMATION:

License Applying For: ARCHITECT

Social Security Number: _____

Last Name: _____ Maiden Name: _____

First Name: _____ Middle Name: _____

Have You Ever Held A Utah License Before? Yes _____ No _____

If Yes, Name of Profession: _____

If Yes, License Number: _____

Gender (Male or Female): _____ Date of Birth: _____

MAILING ADDRESS:

Street: _____

City: _____ State: _____ Zip: _____

County: _____ Telephone: _____

DO NOT WRITE IN THIS SECTION - FOR DIVISION USE ONLY

License/Certificate Number: _____

Date License/Certificate Approved: _____

Approved By: _____

Date License/Certificate Denied: _____

Denied By: _____

Reason For Denial/Other Comments: _____

EDUCATION REQUIREMENT:

Answer “yes” or “no.”

_____ I have a current NCARB Council Record.

If “yes,” date you requested NCARB submit the Council Record to the Utah Board: ____/____/____

_____ I completed an architectural education program accredited by NAAB.

_____ I completed an architectural education program in a foreign country.

If “yes,” have you contacted EESA for the “Comprehensive Evaluation”? _____

_____ I have practiced as a licensed principal for 5 of the last 7 years in a recognized jurisdiction, in lieu of having met the education requirements for licensure.

If “yes,” provide the following information:

Name of State: _____ Phone Number: _____

Name of Contact Person: _____

EXAMINATION REQUIREMENT:

Answer “yes” or “no.”

_____ I have a current NCARB Council Record.

_____ I passed the ARE in Utah.

_____ I passed the ARE in a state other than Utah.

If “yes”, provide the following information:

Name of State: _____ Phone Number: _____

Name of Contact Person: _____

UTAH ARCHITECT LAW AND RULES

TAKE-HOME EXAMINATION

The references have been provided to assist you in selecting your response. The test is not intended to be difficult. The purpose of the test is to bring to your attention specific practice issues that you need to know in order to avoid violating Utah law and rule.

Answer “**true**” or “**false**” for each statement. Do not leave any statement blank.

1. _____ A licensed architect may perform professional engineering work incidental to the practice of architecture. [58-3a-102(6)(b)]
2. _____ A licensed professional engineer is exempt from licensure as an architect while performing engineering or incidental architectural acts or practices that do not exceed the scope of the education and training of the professional engineer performing architecture. [58-3a-304(1)(c)]
3. _____ A licensed architect may design a building that has human occupancy or habitation as its principal purpose, and includes the structural, mechanical and electrical systems, utility services, and other facilities required for the building. [58-3a-102(3)]
4. _____ When submitting a final set of plans and specifications for a building or structure, the final set of plans normally includes floor plans; elevations; site plans; foundations, structural and framing detail; electrical, mechanical and plumbing design; information required by the energy code; specifications and related calculations as appropriate; and all other documents required to obtain a building permit. [58-3a-102(4) and 603(1)]
5. _____ An architect licensed in a state other than Utah is not permitted to engage in architectural services in Utah without first being licensed in Utah, unless exempted from licensure. [58-3a-501(2) and 58-3a-304]
6. _____ An architect licensed in a state other than Utah is permitted to offer to render architectural services in Utah without being licensed in Utah to the extent the architect complies with the requirements set forth in 58-3a-304(1)(a).
7. _____ A person preparing a plan and specification for a one, two, three, or four-family residence not exceeding two stories in height is not required to be a licensed architect. [58-3a-304(1)(b)]
8. _____ A licensed architect may affix his/her seal to a plan, specification, and report only when in accordance with 58-3a-603.

(Questions continue on following page.)

9. _____ An organization engaged in the practice of architecture is exempt from licensure, provided that the organization employs a Utah licensed architect who is in responsible charge of the architectural services provided by that organization, and all other persons employed by the organization who engage in architecture are licensed or exempt from licensure. [58-3a-102(7)]
10. _____ A licensed architect who affixes his/her seal to a plan and a specification in violation of 58-3a-603 is subject to administration action up to and including revocation of license. [58-1-501(2)]
11. _____ Any final plan and specification and report prepared by, or under the supervision of the licensed architect, shall bear the seal of the architect, when submitted to a client, when filed with public authorities, or when submitted to a building official for the purpose of obtaining a building permit, even if the practice is exempt from licensure under Section 58-3a-304. [58-3a-602(2)]
12. _____ A licensed architect may affix his/her seal to a plan, specification, or report prepared by other licensed architects, professional engineers, or professional structural engineers, provided the licensed architect affixing the seal performs a thorough review of all work for compliance with all applicable laws and rules and standards of the profession, and makes any necessary corrections before submitting the final plan, specification or report to a client or to a building official. [58-3a-603(1)(c)]
13. _____ A licensed architect may affix his/her seal to a plan, specification or report prepared by persons exempt from licensure as an architect, professional engineer, or professional structural engineer provided the licensed architect affixing the seal performs a thorough review of all work for compliance with all applicable laws and rules and standards of the profession, and makes any necessary corrections before submitting the final plan, specification, or report to a client or to a building official. [58-3a-603(1)(e)]

ARCHITECT QUALIFYING QUESTIONNAIRE

Answer “yes” or “no” for each question. Do not leave any question blank.

1. _____ Have you ever applied for or received a license, certificate, permit, or registration to practice in a regulated profession under any name other than the name listed on this application?
2. _____ Have you ever been denied the right to sit for a licensure examination?
3. _____ Have you ever had a license, certificate, permit, or registration to practice a regulated profession denied, conditioned, curtailed, limited, restricted, suspended, revoked, reprimanded, or disciplined in any way?
4. _____ Have you ever been permitted to resign or surrender your license, certificate, permit, or registration to practice in a regulated profession while under investigation or while action was pending against you by any professional licensing agency or criminal or administrative jurisdiction?
5. _____ Are you currently under investigation or is any disciplinary action pending against you now by any licensing agency?
6. _____ Is any action pending against you now by either the Federal Drug Enforcement Administration or any state drug enforcement agency?
7. _____ If you are licensed in the occupation/profession for which you are applying, would you pose a direct threat to yourself, to your patients or clients, or to the public health, safety, or welfare because of any circumstance or condition?
8. _____ Have you ever been declared by any court of competent jurisdiction incompetent by reason of mental defect or disease and not restored?
9. _____ Have you ever been terminated from a position because of drug use or abuse?
10. _____ Are you currently using or have you recently (within 90 days) used any drugs (including recreational drugs) without a valid prescription, the possession or distribution of which is unlawful under the Utah Controlled Substances Act or other applicable state or federal law?

(Questions continue on following page.)

11. _____ Have you ever used any drugs without a valid prescription, the possession or distribution of which is unlawful under the Utah Controlled Substances Act or other applicable state or federal law, for which you have not successfully completed or are not now participating in a supervised drug rehabilitation program, or for which you have not otherwise been successfully rehabilitated?
12. _____ Have you ever been involved as the abuser in any incident of verbal, physical, mental, or sexual abuse?
13. _____ Have you ever been arrested for or charged with a misdemeanor in any jurisdiction? Motor vehicle offenses such as driving while impaired or intoxicated must be disclosed but minor traffic offenses such as parking or speeding violations need not be listed.
14. _____ Have you ever been arrested for or charged with a felony in any jurisdiction?
15. _____ Have you ever pled guilty to, no contest to, or been convicted of a misdemeanor in any jurisdiction? Motor vehicle offenses such as driving while impaired or intoxicated must be disclosed but minor traffic offenses such as parking or speeding violations need not be listed.
16. _____ Have you ever pled guilty to, no contest to, or been convicted of a felony in any jurisdiction?
17. _____ Have you ever been allowed to make a plea in abeyance for any criminal charge for which the charge was later dismissed?
18. _____ Have you ever been incarcerated for any reason in any federal, state, or county correctional facility or in any correctional facility in any other jurisdiction?

If you answered “yes” to questions 13, 14, 15, 16, 17, or 18 above, you must include with your application a copy of the police report, court docket, any probation/parole officer report, and a narrative of the circumstances that occurred for EACH and EVERY arrest and/or conviction.

If you are unable to obtain any of the records required above, you must submit documentation on official letterhead from the police department and/or court indicating that the information is no longer available.

If you answered “yes” to any of the above questions, enclose with this application complete information with respect to all circumstances and the final result, if such has been reached.

A “yes” answer does not necessarily mean you will not be granted a license; however, the Division may request additional documentation if the information submitted is insufficient.

AFFIDAVIT and RELEASE AUTHORIZATION

I am the applicant described and identified in this application for licensure, certification, or registration in the State of Utah.

I am qualified in all respects for the license, certificate, or registration for which I am applying in this application.

To the best of my knowledge, the information contained in the application and its supporting document(s) is free of fraud, misrepresentation, or omission of material fact.

To the best of my knowledge, the information contained in the application and its supporting document(s) is truthful, correct, and complete; and, discloses all material facts regarding the applicant and associated individuals necessary to properly evaluate the applicant's qualifications for licensure.

I will ensure that any information subsequently submitted to the Division in conjunction with this application or its supporting documents meet the same standard as set forth above.

I understand that it is unlawful and punishable as a class A misdemeanor to apply for or obtain a license or to otherwise deal with the Division or a licensing board through the use of fraud, forgery, or intentional deception, misrepresentation, misstatement, or omission.

I understand that this application will be classified as a public record and will be available for inspection by the public, except with regard to the release of information which is classified as controlled, private, or protected under the Government Records Access and Management Act or restricted by other law.

I authorize all persons, institutions, organizations, schools, governmental agencies, employers, references, or any others not specifically included in the preceding characterization, which are set forth directly or by reference in this application, to release to the Division of Occupational and Professional Licensing, State of Utah, any files, records, or information of any type reasonably required for the Division to properly evaluate my qualifications for licensure/certification/registration by the State of Utah.

Signature of Applicant: _____

Date of Signature: _____

Printed Name of Applicant: _____

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Division of Occupational and Professional Licensing
160 East 300 South, P.O. Box 146741
Salt Lake City, Utah 84114-6741
FAX: 801-530-6511

REQUEST FOR VERIFICATION OF LICENSE

(Use this form to verify licensure from another state, if applicable.)

TO BE COMPLETED BY THE APPLICANT:

Complete the first section of the form. Request that the verifying state complete the form and mail it directly to the Division or return it to you for submission with your application.

Applicant Name: _____

Street Address: _____

City: _____

State: _____ Zip: _____

I am requesting licensure in the state of Utah as a _____

I am/have been licensed in your state under the name _____

My social security number is _____

My date of birth is _____

My license number in your state is/was _____

I have enclosed the necessary license verification fee in the amount of \$ _____

Signature of Applicant: _____

(Continued on the reverse.)

TO BE COMPLETED BY THE VERIFYING AGENCY:

Please furnish the information requested, sign and verify the document, and mail or fax it directly to the Division or place the completed form in a sealed envelope and provide it to the applicant in person or by mail. The applicant will include the verification with his/her Utah application.

Name of Verifying State: _____

Name of Licensee (as it appears in verifying state's records): _____

Classification of License Issued: _____

License Number: _____ Current Status: _____

Original Date of Licensure: _____ Expiration Date: _____

Continuously Licensed:

_____ Yes _____ No, please explain: _____

Please indicate which version of the architectural examination the applicant took and date passed:

Examination Syllabus (1954-1975): _____

Equivalency Examination (June 1973 – June 1976): _____

Qualifying Test (June 1977 - June 1982): _____

Professional Examination - (Dec 1973- Dec 1978): _____

ARE (1983 to present): _____

If applicant did not pass one of the above named examinations, please indicate on what basis was the applicant licensed: _____

Disciplinary Action or Pending Disciplinary Action:

_____ No _____ Yes, please provide certified copies of all Petitions, Orders, etc.

Signature: _____ Title: _____

Agency: _____ Date: _____

(SEAL)

Division of Occupational & Professional Licensing
160 East 300 South, P.O. Box 146741
Salt Lake City, Utah 84114-6741

VERIFICATION OF EXPERIENCE FOR LICENSURE AS AN ARCHITECT

PART I: To be completed by an applicant applying by endorsement (practice as a principal in responsible charge for 5 of the last 7 years in order to waive the education requirements):

Applicant's Name: _____

Applicant's Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Name of Architectural Organization: _____

Architectural Organization's Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Dates of Employment: from _____ to _____

Average Hours Worked Each Week: _____ Total Number of Months Worked: _____

Indicate if you are an employee, self-employed, partner, or corporate officer:

On additional pages, state your title, list your specific job duties and responsibilities and list your projects and accomplishments documenting your licensed practice as a principal in responsible charge for 5 of the last 7 years.

PART II: To be completed by the licensed architect who is verifying the applicant's architectural experience.

Review the information provided by the applicant in PART I, complete the information requested in PART II, and submit the completed form in a sealed envelope to the applicant for submission with his/her license application.

1. Is the applicant's description of his/her experience correct? _____
2. Was the applicant a licensed principal in responsible charge of the design of the projects listed? _____
3. How do you rate the applicant's knowledge of architecture? _____
4. How do you rate the applicant's ability to practice architecture? _____
5. How do you rate the applicant's competence to practice architecture? _____
6. Would you recommend the applicant be licensed as an architect in the State of Utah?

7. What is the basis of your knowledge of the applicant's knowledge, ability, and competence to practice architecture?

(Continued on the reverse.)

Verifying Licensed Architect's Name: _____

Address of Verifying Architect: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ License Number: _____

State of Licensure: _____ License Expiration Date: _____

I certify that the information contained in this document is true, complete and accurate. I further certify that I understand that to falsify or withhold information may be unprofessional conduct and would subject my license to disciplinary action.

Signature of Licensed Architect

Verifying the Information: _____

(Seal Imprint of Stamp)

Date of Signature: _____

NOTE: This form will not be accepted without the stamp/seal of the verifying architect and original signature and date of the verifying architect written across the face of the seal.